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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MARYLAND	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself					
		About Debtor 1:	Abou	t Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.		Shamika First name  T.  Middle name  Quillen  Last name and Suffix (Sr., Jr., II, III)		Shawn First name  Richard  Middle name  Quillen  Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2758	xxx-	xx-7577		

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Debtor 1 Shamika T. Quillen
Debtor 2 Shawn Richard Quillen Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years     Include trade names and doing business as names		■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	4211 Massachusetts Ave.	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Baltimore City			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 2 Shawn Richard Q					Case number (if known)	
Par	t 2: Tell the Court About	Your Bankı	ruptcy Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapt	er 7				
		☐ Chapt	er 11				
		☐ Chapt	er 12				
		☐ Chapt	er 13				
8.	How you will pay the fee	abo ordo a pi	out how you mer. If your atto re-printed add	nay pay. Typically, it orney is submitting y dress.	you are paying the fee your payment on your be	eck with the clerk's office in your local court for more yourself, you may pay with cash, cashier's check, o shalf, your attorney may pay with a credit card or che	or money leck with
				<b>e fee in installmen</b> • <i>Installments</i> (Offici		tion, sign and attach the Application for Individuals	to Pay
		but app	is not require lies to your fa	d to, waive your fee amily size and you a	e, and may do so only if your are unable to pay the fee	ion only if you are filing for Chapter 7. By law, a judg your income is less than 150% of the official poverty in installments). If you choose this option, you mus ficial Form 103B) and file it with your petition.	y line that
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District			Case number	
			District			Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to line	12.			
	residence:	☐ Yes.	Has your la	andlord obtained ar	eviction judgment again	nst you?	
			□ No	. Go to line 12.			
				s. Fill out <i>Initial Sta</i> s bankruptcy petitio		n Judgment Against You (Form 101A) and file it as p	part of

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	otor 1 otor 2	Shamika T. Quille Shawn Richard Q			Case number (if known)			
Par	t 3:	Report About Any Bu	sinesses	You Own as a Sole Propr	ietor			
12.	of an	ou a sole proprietor y full- or part-time	■ No.	Go to Part 4.				
	busir	ness?	☐ Yes.	Name and location of b	usiness			
	busin an ind sepai as a d	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.		Name of business, if ar	ny			
	If you sole p	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, S	tate & ZIP Code			
		his petition.		Check the appropriate	box to describe your business:			
				☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))			
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))							
			Stockbroker (as defined in 11 U.S.C. § 101(53A))					
				☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))			
				☐ None of the abo	ove			
13.	Chap Bank	you filing under oter 11 of the cruptcy Code and are a s <i>mall busin</i> ess or?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement o operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a	definition of small	■ No.	I am not filing under Ch	apter 11.			
		ness debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4:	Report if You Own or	Have Any	Hazardous Property or A	Any Property That Needs Immediate Attention			
14.	•	ou own or have any erty that poses or is	■ No.					
	allegories of imident	ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is the hazard?				
	Or do	c health or safety? b you own any erty that needs ediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?							
					Number, Street, City, State & Zip Code			

Case 19-15122 Doc 1 Filed 04/15/19 Page 5 of 59 Debtor 1 Shamika T. Quillen **Shawn Richard Quillen** Debtor 2 Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I filed counseling agency within the 180 days before I one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. of completion. so, you are not eligible to file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: ☐ Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so.

Active duty.

combat zone.

of credit counseling with the court.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

Active duty.

military combat zone.

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

П

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	tor 1 tor 2	Shamika T. Quiller Shawn Richard Qu				Case nu	umber (if known	)	
Par	t 6:	Answer These Questi	ons for Re	porting Purposes					
16.		kind of debts do		Are your debts primarily consu individual primarily for a personal			e defined in 11	I U.S.C. § 101(8) as "incurred by an	
				☐ No. Go to line 16b.	•				
				Yes. Go to line 17.					
				<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
				☐ No. Go to line 16c.					
				☐ Yes. Go to line 17.					
			16c.	State the type of debts you owe the	nat are not consur	mer debts or bus	siness debts		
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.				
	after	ou estimate that any exempt erty is excluded and		I am filing under Chapter 7. Do yo are paid that funds will be availab				xcluded and administrative expenses	
		nistrative expenses aid that funds will		■ No					
be available for		ailable for bution to unsecured		□ Yes					
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000			25,001-50,000	
		you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001-25,0			50,001-100,000	
			☐ 100-19 ☐ 200-99	. 66		00		More than100,000	
19.		ow much do you	<b>\$0 - \$5</b>	0,000	□ \$1,000,001	- \$10 million		\$500,000,001 - \$1 billion	
		nate your assets to orth?	□ \$50,001 - \$100,000		□ \$10,000,001			\$1,000,000,001 - \$10 billion	
				01 - \$500,000 01 - \$1 million	□ \$50,000,001 □ \$100,000,00	- \$100 million )1 - \$500 million		\$10,000,000,001 - \$50 billion More than \$50 billion	
20.		much do you	□ \$0 - \$5	0,000	□ \$1,000,001	- \$10 million		\$500,000,001 - \$1 billion	
	estin to be	nate your liabilities ?		01 - \$100,000	□ \$10,000,001			\$1,000,000,001 - \$10 billion	
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million			\$10,000,000,001 - \$50 billion More than \$50 billion	
Part	t 7:	Sign Below							
For	you		I have exa	amined this petition, and I declare	under penalty of p	perjury that the i	information pr	ovided is true and correct.	
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					rney to help me fill out this				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					his petition.			
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571.						
			/s/ Sham	nika T. Quillen		/s/ Shawn R			
				n <b>T. Quillen</b> of Debtor 1		Shawn Rich Signature of D		I	
			Executed	on April 15, 2019 MM / DD / YYYY		Executed on	April 15, 2		

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		3			
Debtor 1 Debtor 2 Shamika T. Quill Shawn Richard (	<del></del>	Cas	se number (if known)		
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Star for which the person is eligible. I also certify that I h	tes Code, and have	explained the relief available under each chapter		
If you are not represented by an attorney, you do not need to file this page.	orney, you do not need schedules filed with the petition is incorrect.				
	/s/ James D. Green	Date	April 15, 2019		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	James D. Green Printed name				
	Law Offices of James D. Green				
	Firm name				
	30 Greenway, NW				
	Suite 1				
	Glen Burnie, MD 21061  Number, Street, City, State & ZIP Code				
	Number, Sireet, Oily, State & Zir Code				
	Contact phone 410-766-9237	Email address	JDGLAW@VERIZON.NET		
	02225 MD				

Bar number & State

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Fill	Il in this information to identify your case:			
Deb	ebtor 1 Shamika T. Quillen			
Del	First Name Middle Name Last Name ebtor 2 Shawn Richard Quillen			
	oouse if, filing) First Name Middle Name Last Name			
Uni	nited States Bankruptcy Court for the: DISTRICT OF MARYLAND			
	ase numberkknown)		_	c if this is an ded filing
	fficial Form 106Sum			
	ummary of Your Assets and Liabilities and Certain Statistical In			12/15
info you	as complete and accurate as possible. If two married people are filing together, both are equal ormation. Fill out all of your schedules first; then complete the information on this form. If you ur original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
Par	art 1: Summarize Your Assets			
			Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	41,657.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	41,657.00
Par	art 2: Summarize Your Liabilities			
				<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1	of Schedule D	\$	55,990.84
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.		\$	133,347.00
	Yo	ur total liabilities	\$	189,337.84
Par	art 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,268.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	5,048.00
Par	art 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form t	o the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.		a personal,	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the court with your other schedules.	ne form. Check this	box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Shamika T. Quillen

Debtor 2 Shawn Richard Quillen Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,750.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$	52,207.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	52,207.00

		Case	19-15122 D0C 1 I	-lied 04/15/19 P	age 10 of 59	
Fill in thi	is information	on to identify your	case and this filing:			
Debtor 1	9	Shamika T. Quille	en			
		irst Name	Middle Name	Last Name		
Debtor 2	5	Shawn Richard C	Quillen			
(Spouse, if f	filing) F	irst Name	Middle Name	Last Name		
United St	tates Bankru	ptcy Court for the:	DISTRICT OF MARYLAND			
Case nur	mber			_		☐ Check if this is an amended filing
_		106A/B				
Sche	edule <i>i</i>	A/B: Prop	erty			12/15
Answer ev	ery question. Describe Each	n Residence, Building	g, Land, or Other Real Estate You	Own or Have an Interest In		· ,
1. Do you	own or have	any legal or equitabl	e interest in any residence, buildin	g, land, or similar property?	•	
■ No. 0	Go to Part 2.					
☐ Yes.	Where is the	property?				
Part 2: D	Describe Your	Vehicles				
			uitable interest in any vehicles le, also report it on Schedule G:			ehicles you own that
3. <b>Cars, v</b>	vans, trucks	s, tractors, sport u	tility vehicles, motorcycles			
□ No						
■ Yes						
0.4 M-	<sub>ake</sub> . Pon	tiac	Who has an interest in	the meaning of	Do not deduct secured cla	aims or exemptions. Put
	A =44		Who has an interest in	The property? Check one	the amount of any secure	
			Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
			Debtor 2 only	- 1	Current value of the	Current value of the
-	proximate mil		Debtor 1 and Debtor 2		entire property?	portion you own?
	nei inionnatio	1.	At least one of the de	otors and another		
			Check if this is com (see instructions)	munity property	\$4,000.00	\$4,000.00
3.2 Ma	ake: <b>VW</b>		Who has an interest in	the property? Check one	Do not deduct secured cla	
	odel: Golf	•	Debtor 1 only	- Frageria Chook one	the amount of any secure Creditors Who Have Clair	
	ear: 201		Debtor 1 only  Debtor 2 only			
	proximate mil		Debtor 2 only  Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
-	her informatio		At least one of the de	•	onthis property:	pointon 100 0mm
	n of \$12,7		At least one of the de	otors and another		
	equity		Check if this is come (see instructions)	munity property	\$4,000.00	\$4,000.00

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		hamika T. Quillen hawn Richard Quillen	c	ase number (if known)	
			and other recreational vehicles, other vehicles, as watercraft, fishing vessels, snowmobiles, motorcycle		
	l No				
	Yes				
4.1	Make:	Clayton Manufacture	Who has an interest in the property? Check one		I claims or exemptions. Put ured claims on Schedule D:
	Model: Year:	Mobile Home 2016	Debtor 1 only	Creditors Who Have C	Claims Secured by Property.
	rear.	2010	_ □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other inf	ormation:	☐ At least one of the debtors and another	chare property.	portion you own:
	Lien o no equ	f \$43,225.84 uity	Check if this is community property (see instructions)	\$20,000.00	\$20,000.00
.part	ages you 3: Descri	have attached for Part 2. Wr	own for all of your entries from Part 2, including a ite that number hered Items		\$28,000.00
DO	you own c	or nave any legal or equitable	interest in any or the following items?		portion you own?  Do not deduct secured claims or exemptions.
		Furniture			\$500.00
		Clothing			\$250.00
E		Televisions and radios; audio, including cell phones, camera:	video, stereo, and digital equipment; computers, printes, media players, games	ers, scanners; music colle	ctions; electronic devices
			gs, prints, or other artwork; books, pictures, or other a	t objects; stamp, coin, or	baseball card collections;
	■ No □ Yes. De	scribe			
E	Examples:	for sports and hobbies Sports, photographic, exercise musical instruments	, and other hobby equipment; bicycles, pool tables, go	lf clubs, skis; canoes and	kayaks; carpentry tools;
_	■ No □ Yes. De	scribe			
_	Firearms Examples ■ No	: Pistols, rifles, shotguns, amm	unition, and related equipment		
	Yes. De	scribe			
_	<b>Clothes</b> <i>Examples</i> ■ No	: Everyday clothes, furs, leathe	er coats, designer wear, shoes, accessories		
	⊒Yes. De	scribe			

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Debtor 1 Debtor 2	Shamika T. Quillen Shawn Richard Qui	llen		Case number (if known)	
12. <b>Jewel</b>		stume jewelry, engag	pement rings, wedding rings, heirloom	jewelry, watches, gems, go	old, silver
■ No	Describe				
	. Describe				
-	<b>arm animals</b> nples: Dogs, cats, birds, ho	rses			
■ No					
⊔ Yes	. Describe				
14. <b>Any o</b> ■ No	ther personal and house	hold items you did i	not already list, including any healt	h aids you did not list	
	. Give specific information				
			art 3, including any entries for page	s you have attached	\$750.00
Part 4: Do	escribe Your Financial Asset	:s		_	
	wn or have any legal or e		any of the following?		Current value of the
					portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b>					
Exam □ No	nples: Money you have in y	our wallet, in your ho	me, in a safe deposit box, and on han	d when you file your petitio	n
■ Yes					
				Cash	\$50.00
Exam			unts; certificates of deposit; shares in with the same institution, list each.  Institution name:	credit unions, brokerage h	ouses, and other similar
	17.1.	Checking	Wells Fargo Bank		\$100.00
Exam ■ No	s, mutual funds, or public		kerage firms, money market accounts	<b>S</b>	
		interests in incorna	wated and unincorporated business	nas including an interact	in an LLC partnership and
	venture	interests in incorpc	orated and unincorporated busines	ses, including an interest	in an LLO, partnership, and
	. Give specific information Na	about themme of entity:		% of ownership:	
Nego	tiable instruments include p	personal checks, cas	tiable and non-negotiable instrume hiers' checks, promissory notes, and in hisfer to someone by signing or delive	money orders.	
☐ Yes	. Give specific information Iss	about them uer name:			
	ement or pension account aples: Interests in IRA, ERIS		03(b), thrift savings accounts, or other	pension or profit-sharing p	olans
☐ Yes	. List each account separat	tely.			
Official For			Schedule A/B: Property		page 3

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	ebtor 1 ebtor 2	Shamika 1 Shawn Ric	Г. Quillen chard Quillen			Case number (if known)	
			Type of accou	ınt: In	stitution name:		
22.	Your sh Examp □ No	nare of all unu		repaid rent, public uti	may continue service or use fro lities (electric, gas, water), teleco stitution name or individual:		or others
			Rental depo	osit S	amuel Velez		\$1,800.00
23.	_	es (A contrac	t for a periodic payn	nent of money to you,	either for life or for a number of	years)	
	■ No □ Yes		Issuer name and d	escription.			
24.	26 U.S.0		ation IRA, in an acc ), 529A(b), and 529		ABLE program, or under a qua	lified state tuition progra	m.
	■ No □ Yes		Institution name an	d description. Separa	ately file the records of any intere	ests.11 U.S.C. § 521(c):	
25.	■ No	•	future interests in information about the		n anything listed in line 1), and	l rights or powers exercis	able for your benefit
26.	Patents Examp  ■ No	s, copyrights les: Internet o	, trademarks, trade	e secrets, and other sites, proceeds from r	intellectual property oyalties and licensing agreemen	ts	
27.	Examp  ■ No	les: Building p	s, and other generation about the contraction about the contractio	censes, cooperative a	ssociation holdings, liquor licens	ses, professional licenses	
M	oney or p	oroperty owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	□ No	unds owed to	•	em, including whethe	r you already filed the returns an	d the tax years	
				2018		Federal	\$7,850.00
				2018		State	\$2,290.00
29.	■ No	les: Past due	or lump sum alimor	y, spousal support, c	hild support, maintenance, divor	ce settlement, property set	tlement
30.	Examp  ■ No	les: Unpaid w	unpaid loans you m	rance payments, disa ade to someone else	ability benefits, sick pay, vacatior	n pay, workers' compensat	ion, Social Security

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Debtor 1 Debtor 2	Shamika T. Quillen Shawn Richard Quillen	Case number (if known)	
	ests in insurance policies  mples: Health, disability, or life insurance; health savings account	nt (HSA); credit, homeowner's, or renter's insura	nce
	s. Name the insurance company of each policy and list its value Company name:	e. Beneficiary:	Surrender or refund value:
If you some No	interest in property that is due you from someone who has u are the beneficiary of a living trust, expect proceeds from a life eone has died.  s. Give specific information		eive property because
Exar ■ No	ns against third parties, whether or not you have filed a law mples: Accidents, employment disputes, insurance claims, or rights. Describe each claim		
■ No	r contingent and unliquidated claims of every nature, includes.  Describe each claim	ding counterclaims of the debtor and rights t	o set off claims
□ No	financial assets you did not already list s. Give specific information		
	one week's net wages		\$817.00
	I the dollar value of all of your entries from Part 4, including Part 4. Write that number here		\$12,907.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real estate in Part 1.	
■ No. (	u own or have any legal or equitable interest in any business-relate Go to Part 6. Go to line 38.	d property?	
	Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest In.	
■ No	ou own or have any legal or equitable interest in any farm- o. Go to Part 7. es. Go to line 47.	or commercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above	
	ou have other property of any kind you did not already list?  mples: Season tickets, country club membership		
	s. Give specific information		
54 Add	the dollar value of all of your entries from Part 7. Write that	at number here	00.00

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Shamika T. Quillen Debtor 1 Debtor 2 **Shawn Richard Quillen** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 56. \$28,000.00 57. Part 3: Total personal and household items, line 15 \$750.00 58. Part 4: Total financial assets, line 36 \$12,907.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$41,657.00 \$41,657.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$41,657.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Shamika T. Quille	en		
	First Name	Middle Name	Last Name	<del></del>
Debtor 2	Shawn Richard Q	uillen		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLAND		
Case number _				
(if known)				☐ Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2005 Pontiac Aztek Line from Schedule A/B: 3.1	\$4,000.00		\$4,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Zino nom concado 772. c			100% of fair market value, up to any applicable statutory limit	
Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
Ellie Holli Geriedale AVD. G.1			100% of fair market value, up to any applicable statutory limit	1100.3 11 004(5)(4)
Clothing Line from Schedule A/B: 6.2	\$250.00		\$250.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(4)
Ellio IIoni osiiodalo 702. G.E			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$50.00		\$50.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
Ello Holli Golloddio AVD. 14.1			100% of fair market value, up to any applicable statutory limit	
Checking: Wells Fargo Bank Line from Schedule A/B: 17.1	\$100.00		\$100.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
Line from Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	1100.3 11 007(0)(0)

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Debtor Debtor				Case number (if known)		
	ief description of the property and line on hedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	ental deposit: Samuel Velez	\$1,800.00		\$1,800.00	Md. Code Ann., Real Prop. § 8-203(d)(3)(ii)	
Lii	io iidiii Gonegale / V.B. <b>ZZII</b>			100% of fair market value, up to any applicable statutory limit	o-200(a)(a)(ii)	
	ederal: 2018 ne from Schedule A/B: 28.1	\$7,850.00		\$7,850.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
LII	le Holli Schedule A/B. 20.1			100% of fair market value, up to any applicable statutory limit		
	rate: 2018	\$2,290.00		\$2,290.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
LII	le Holli Schedule A.B. 20.2			100% of fair market value, up to any applicable statutory limit		
	ne week's net wages	\$817.00		\$817.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)	
LII	ie IIIIII Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit	Proc. 9 11-504(b)(5)	
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No  Yes. Did you acquire the property covered No  No  Yes	3 years after that for ca	ases fil	,	,	

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	Ouoc	710 10122 2001 11100	0 17 107	io i ago io	01 00	
Fill in this informa	ation to identify you	r case:				
Debtor 1	Shamika T. Quil	len				
	First Name	Middle Name Last	Name			
Debtor 2	Shawn Richard	Quillen				
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States Bank	cruptcy Court for the:	DISTRICT OF MARYLAND				
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form		Who Llove Claims See	ourod	by Dranart		40/45
Schedule L	): Creditors	Who Have Claims Sec	curea	by Property	<u>/</u>	12/15
		f two married people are filing together, bo out, number the entries, and attach it to this				
• •	ave claims secured by	your property?				
<u> </u>	-	his form to the court with your other sche	dules You	ı have nothing else to	report on this form	
_		•	adico. Toc	Thave hourning cloc to	roport on the form.	
	all of the information b	Delow.				
Part 1: List All	Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	ait 2. A5	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 21st Mortga	•	Describe the property that secures the cla	nim:	\$43,225.84	\$20,000.00	\$23,225.84
Creditor's Name	<u>n</u>	2016 Clayton Manufacture Mobil		Ψ10,220.01	Ψ20,000.00	Ψ20,220.04
		Home				
620 Market Knoxville, 7		As of the date you file, the claim is: Check apply.	all that			
	ity, State & Zip Code	☐ Contingent ☐ Unliquidated				
Number, Street, C	ity, State & Zip Code	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortga	age or secui	red		
Debtor 2 only		car loan)				
■ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
Check if this clair community debt		Other (including a right to offset)	tgage			

Date debt was incurred 11/2016

Last 4 digits of account number

0012

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Deb	tor 1	Shamika 7	Γ. Quillen			(	Case number (if known)		
		First Name	Middle	Name	Last Name	_	•		
Deb	tor 2	Shawn Ri	chard Quiller	1					
		First Name	Middle	Name	Last Name				
2.2	1	edit Accepta	ance	Describe the	property that secures	the claim:	\$12,765.00	\$4,000.00	\$8,765.00
		itor's Name		2011 VW (		THE GIAIII.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Box 5070 uthfield, MI	48086	As of the dat apply.	e you file, the claim is	: Check all that			
	Numl	per, Street, City, S	State & Zip Code	Unliquidat					
Who	owe	s the debt?	heck one.	☐ Disputed Nature of lie	n. Check all that apply.				
_		1 only 2 only		An agreen car loan)	nent you made (such as	s mortgage or sec	cured		
	Debtor	1 and Debtor 2	only!	☐ Statutory I	ien (such as tax lien, me	echanic's lien)			
	t leas	t one of the deb	otors and another	☐ Judgment	lien from a lawsuit				
		if this claim re unity debt	elates to a	Other (inc	uding a right to offset)	Car Loan			
Date	debt	was incurred	10/14/2017	Last 4	digits of account nun	nber			
Ad	d the	dollar value o	f your entries in	Column A on thi	s page. Write that nun	mber here:	\$55,990.8	4	
		the last page at number her		d the dollar valu	e totals from all pages	<b>5.</b>	\$55,990.8	_	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case	19-15122 L	JOC 1	riieu 04/ i	5/19 Pa(	ge 20 01 59	
Fill in th	nis information to i	dentify your c	ase:					
Debtor 1	Sham	ika T. Quiller	1					
	First Nam		Middle Name		Last Name			
Debtor 2	2 Shaw	n Richard Qւ	illen					
(Spouse if,	filing) First Nam	ie	Middle Name		Last Name			
United S	States Bankruptcy C	ourt for the:	DISTRICT OF MA	RYLAND				
Case nu	ımber							
(if known)								Check if this is an
								amended filing
Officia	al Form 106E	/F						
	dule E/F: Cre		no Have Une	secured	d Claims			12/15
						Part 2 for credite	are with NONDDIODITY cla	ims. List the other party to
left. Attac		age to this page own).	. If you have no info				d, fill it out, number the en art. On the top of any add	
1. Do a	ny creditors have pri			?				
■ N	lo. Go to Part 2.	•						
□ Y								
Part 2:		NONPRIORITY	Unsecured Clain	ns				
	ny creditors have no							
ПΝ	o. You have nothing to	o report in this pa	rt. Submit this form to	the court wit	h your other sche	edules.		
<b>■</b> Y	es.							
unse	cured claim, list the cr one creditor holds a p	editor separately	for each claim. For ea	ach claim liste	ed, identify what t	type of claim it is.	im. If a creditor has more the Do not list claims already in unsecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	AD Astra Recov	ery Services	Last 4	4 digits of ac	count number	9597		\$687.00
	Nonpriority Creditor's	Name		_				· ·
	7330 W. 33rd St.		When	was the de	bt incurred?	07/04/2018		_
	Wichita, KS 672 Number Street City St		As of	the date you	u file, the claim i	is: Check all that	apply	
	Who incurred the de	•		, , , , , , , , , , , , , , , , , , , ,	.,			
	Debtor 1 only		□ co	ontingent				
	Debtor 2 only		☐ Ur	nliquidated				
	Debtor 1 and Debt	or 2 only	☐ Di:	sputed				
	☐ At least one of the	debtors and anot	her Type	of NONPRIC	RITY unsecured	d claim:		
	☐ Check if this clair	n is for a comm	unity 🗖 St	udent loans				
	debt	4 10				aration agreement	t or divorce that you did not	
	Is the claim subject t	o onser?	•	as priority cl		g plans, and othe	or aimilar dabta	
	■ No							
	☐ Yes		■ Ot	her. Specify	ıoan - spee	dycash.com		

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Debto	Shawn Richard Quillen	Case number (if known)	
4.2	AR Resources, Inc.	Last 4 digits of account number	\$140.00
	Nonpriority Creditor's Name 1777 Sentry Pkwy. W., Blue Bell, PA 19422	When was the debt incurred? 03/07/2016	*******
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Beebe Physician Network	
4.3	Bank of Missouri	Last 4 digits of account number 0312	\$446.00
	Nonpriority Creditor's Name 5109 S. Broadband Lane Sioux Falls, SD 57109	When was the debt incurred? 02/08/2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify credit card	
4.4	Bay Area Receivables, Inc.	Last 4 digits of account number	\$39.00
	Nonpriority Creditor's Name 714 Eastern Shore Drive Salisbury, MD 21804	When was the debt incurred? 02/14/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Your Docs In	

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Debtor 2	Shamika T. Quillen Shawn Richard Quillen	Case number (if known)	
	Credit Acceptance Corporation Nonpriority Creditor's Name	Last 4 digits of account number	\$12,765.00
	PO Box 5070 Southfield, MI 48086	When was the debt incurred?	
_	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 2011 VW Golf	
	Credit Protection Association Nonpriority Creditor's Name	Last 4 digits of account number 2975	\$951.00
	13355 Noel Road, Suite 2100 Dallas, TX 75240	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Media.com cable	
4.7	Delmarva Collection	Last 4 digits of account number 0220	\$990.00
	Nonpriority Creditor's Name PO Box 37	When was the debt incurred? 04/15/2016	******
_	Salisbury, MD 21803-0037  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поль	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Bayside Health Assoc	
		• •	

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Debtor Debtor	1 Shamika T. Quillen 2 Shawn Richard Quillen		Case number (if known)	
4.8	Depart of Ed/Nelnet	Last 4 digits of account number	0686	\$3,774.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	07/16/2012	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	1 claim	
	At least one of the debtors and another	Student loans	a ciaiiii.	
	Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	n	
4.9	Depart of Ed/Nelnet	Last 4 digits of account number	0686	\$8,687.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	07/16/2012	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	n	
4.1	Depart of Ed/Nelnet	Last 4 digits of account number	9087	\$3,774.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	04/19/2013	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans	rotion correspond or divorce that the did	
	Is the claim subject to offset?	<ul> <li>Obligations arising out of a separe report as priority claims</li> </ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	n	

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Debtoi Debtoi	r 1 Shamika T. Quillen r 2 Shawn Richard Quillen			
4.1 1	Depart of Ed/NeInet	Last 4 digits of account number	9087	\$8,341.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400	When was the debt incurred?	04/19/2013	
	Aurora, CO 80014  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	n	
4.1	Depart of Ed/NeInet	Last 4 digits of account number	3342	\$4,747.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	01/17/2014	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	☐ Other. Specify		
		student loa	n	
4.1	Depart of Ed/Nelnet	Last 4 digits of account number	3610	\$3,267.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	01/17/2014	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

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			<b>.</b>
Depart of Ed/NeInet Ionpriority Creditor's Name	Last 4 digits of account number	4709	\$2,339.0
3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	06/28/2014	
lumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Vho incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
Depart of Ed/Nelnet	Last 4 digits of account number	4709	\$544.00
Ronpriority Creditor's Name	When was the debt incurred?	06/28/2014	
Aurora, CO 80014  Jumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Vho incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	☐ Other. Specify		
	student loa	ın	
Depart of Ed/Nelnet	Last 4 digits of account number	4709	\$1,082.00
lonpriority Creditor's Name 8015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	07/12/2014	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
$\operatorname{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
lebt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing	og plane, and other similar debte	
No	Debis to perision or prolit-sharing	ig pians, and other similar debts	

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Debto Debto	r 1 Shamika T. Quillen r 2 Shawn Richard Quillen		Case number (if known)	
4.1 7	Depart of Ed/Nelnet	Last 4 digits of account number	7707	\$3,246.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	01/15/2015	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes			
		student loa	n	
4.1 8	Depart of Ed/NeInet  Nonpriority Creditor's Name	Last 4 digits of account number	7707	\$4,708.00
	3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	01/15/2015	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify		
		student loa	n	
4.1 9	Depart of Ed/Nelnet	Last 4 digits of account number	1586	\$3,211.00
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred?	10/15/2015	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	n	

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Debto	Shawn Richard Quillen	Case number (if known)		
4.2	Depart of Ed/Nelnet	Last 4 digits of account number 1586	\$4,487.00	
	Nonpriority Creditor's Name 3015 Parker Rd., Ste 400 Aurora, CO 80014	When was the debt incurred? 10/15/2015	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify	_	
		student loan		
4.2 1	First Advantage/NCAC  Nonpriority Creditor's Name	Last 4 digits of account number	\$3,210.00	
	12770 Coit Rd., Ste 1000 Dallas, TX 75251	When was the debt incurred? 10/11/2018	_	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Chartley Towne	_	
4.2	First Collect Inc.	Last 4 digits of account number 4237	\$251.00	
	Nonpriority Creditor's Name PO Box 102 Lewes, DE 19958	When was the debt incurred? 08/23/2016	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify Nanticoke Memorial Hosptial	_	

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First Collect Inc.	Last 4 digits of account number	4509	\$111.0
Nonpriority Creditor's Name PO Box 102	When was the debt incurred?	01/13/2017	
Lewes, DE 19958  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Nanticoke	Memorial Hospital	
First Collect Inc.	Last 4 digits of account number	4518	\$51.0
Nonpriority Creditor's Name PO Box 102	When was the debt incurred?	01/20/2017	
Lewes 19958  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Nanticoke	Mem Hospital	
First Collect Inc.	Last 4 digits of account number	4749	\$54.00
Nonpriority Creditor's Name PO Box 102	When was the debt incurred?	06/01/2017	
Lewes, DE 19958  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Nanticoke	Mem Hospital	

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First Collect Inc.	Last 4 digits of account number	4879	\$52.0
Nonpriority Creditor's Name PO Box 102	When was the debt incurred?	08/15/2017	
Lewes, DE 19958  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Sthrn Denta	al Associates	
First Collect Inc.	Last 4 digits of account number	4784	\$2,347.00
Nonpriority Creditor's Name PO Box 102	When was the debt incurred?	06/23/2017	
Lewes, DE 19958  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Nanticoke	Mem Hospital	
First Collect Inc.	Last 4 digits of account number	4934	\$181.00
Nonpriority Creditor's Name	When was the debt incurred?	09/22/2017	
Lewes, DE 19958  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u 0	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other Specify Nanticoke	<del>-</del> '	

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Shawn Richard Quillen			
First Collect Inc.	Last 4 digits of account number	4786	\$862.00
Nonpriority Creditor's Name	When was the debt incurred?	06/23/2017	
_ewes, DE 19958	_		
lumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	o ciaim:	
☐ Check if this claim is for a community		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	fraction agreement of divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Nanticoke	Mem Hospital	
First Collect Inc.	Last 4 digits of account number	5401	\$215.00
Nonpriority Creditor's Name	When was the debt incurred?	07/16/2018	
.ewes, DE 19958 lumber Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	to of the date you me, the claim	o. Chook an that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Peninsula I	Dental	
Jefferson Capital System	Last 4 digits of account number	8360	\$724.00
Nonpriority Creditor's Name	-		
l 6 McIeland Rd. Saint Cloud, MN 56303	When was the debt incurred?	10/01/2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	o plans, and other similar debts	
— INO	- 2000 to periotori or profit dilatif	.g p, and out of out and dobto	

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L.J. Ross Associates	Last 4 digits of account number	1943	\$931.00
Nonpriority Creditor's Name 4 Universal Way	When was the debt incurred?	11/20/2018	
Jackson, MI 49202 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify BGE		
Midland Funding, LLC	Last 4 digits of account number	6740	\$861.00
Nonpriority Creditor's Name 2365 Northside Dr., Ste 300	When was the debt incurred?	08/21/2015	· · · · · ·
San Diego, CA 92108  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Synchrony	Bank	
National Credit Audit Corporation	Last 4 digits of account number	3677	\$3,210.00
Nonpriority Creditor's Name 12770 Coit Rd., Ste 1000 Dallas, TX 75251-1336	When was the debt incurred?	10/11/2018	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Chartley To		

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Debtor 1 Shamika T. Quillen  Debtor 2 Shawn Richard Quillen		Case number (if known)		
4.3 5	Nationwide Credit Corporation	Last 4 digits of account number	2610	\$1,909.00
	Nonpriority Creditor's Name <b>5503 Cherokee Ave.</b>	When was the debt incurred?	12/01/2016	
	Alexandria, VA 22312-2307  Number Street City State Zip Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Beebe Hea	Ithcare	
4.3 6	NC Financial	Last 4 digits of account number	5081	\$42,888.00
	Nonpriority Creditor's Name 175 W. Jackson Blvd., Ste 1000 Chicago, IL 60604	When was the debt incurred?	2018	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify mobile hor	ne	
4.3 7	Net Credit  Nonpriority Creditor's Name	Last 4 digits of account number		\$1,716.00
	200 W. Jackson Blvd., Ste 2400 Chicago, IL 60606	When was the debt incurred?	03/02/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		

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Shawn Richard Quillen	Case number (if known)	
Phoenix Financial Services, LLC.	Last 4 digits of account number 5357	\$170.00
Nonpriority Creditor's Name PO Box 361450	When was the debt incurred? 01/03/2019	
Indianapolis, IN 46236-1450  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did r report as priority claims	not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify EPMG of DE PA	
Southwest Credit Systems	Last 4 digits of account number	\$898.00
Nonpriority Creditor's Name 4120 International Pkwy Carrollton, TX 75007	When was the debt incurred? 10/02/2018	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did r report as priority claims	not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Tmobile	
State Collection Svc.	Last 4 digits of account number 4823	\$76.0
Nonpriority Creditor's Name PO Box 6250	When was the debt incurred? 04/22/2018	
Madison, WI 53701  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did r report as priority claims	not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Bayhealth	

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Debto Debto	r 1 Shamika T. Quillen r 2 Shawn Richard Quillen		Case number (if known)	
4.4 1	SW Credit Systems, L.P	Last 4 digits of account number	6822	\$861.00
	Nonpriority Creditor's Name 4120 International Pkwy, Ste 1100 Carrollton, TX 75007	When was the debt incurred?	10/02/2018	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Tmobile		
4.4	Syncb/Paypalsmartconn	Last 4 digits of account number	4123	\$618.00
	Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896-5005	When was the debt incurred?	01/30/2014	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify credit card		
4.4	The Crossings at Oak Orchard	Last 4 digits of account number		\$1,395.00
	Nonpriority Creditor's Name 27825 Sandy Dr.	When was the debt incurred?		
	Millsboro, DE 19966  Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
		_	אַ אַימייט, מווע טנוופו אווווומו עפטנא	
	Yes	Other. Specify		

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Debioi 2	Shawn Richard Quillen	Case number (if known)	
4.4 4	ransworld Sys Inc/51	Last 4 digits of account number	\$437.00
	Ionpriority Creditor's Name	When was the debt incurred? 12/26/2017	<u>·</u>
	Vilmington, DE 19850	12/20/2017	
N	lumber Street City State Zip Code  Vho incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	ebt s the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
[	Yes	■ Other. Specify Christina Care Health Service	
4.4	ransworld Systems	Last 4 digits of account number 9612	\$437.00
	Ionpriority Creditor's Name	Last 4 digits of account number	Ψ-57.00
F	PO Box 15273 Vilmington, DE 19850	When was the debt incurred? 12/26/2017	
	lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
V	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
d	ebt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
Is	s the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
[	Yes	Other. Specify Christina Care Health Service	
4.4 6	Villiams and Fudge	Last 4 digits of account number	\$657.00
	Ionpriority Creditor's Name		<u> </u>
F	00 Chatham Ave. Rock Hill, SC 29731	When was the debt incurred?	
	lumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
_	Vho incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	ebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
_	<u> </u>	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	No		
L	Yes	■ Other. Specify Strayer University	

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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	Onami Monara Gamon		
Debtor 2	Shawn Richard Quillen	Case number (if known)	
Debtor 1	Snamika I. Quillen		

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim	
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	52,207.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	, , ,	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	81,140.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	133,347.00

### Case 19-15122 Doc 1 Filed 04/15/19 Page 37 of 59

Fill in this inform	mation to identify your	case:		
Debtor 1	Shamika T. Quille	en		
	First Name	Middle Name	Last Name	
Debtor 2	Shawn Richard C	uillen		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	AND	
Case number _				
(if known)				☐ Check it
				amende

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Rent-A-Center 5652 Baltimore National Pkwy Catonsville, MD 21228 Dining room table and chairs

## Case 19-15122 Doc 1 Filed 04/15/19 Page 38 of 59

Fill in this	information to identify your case:		
Debtor 1	Shamika T. Quillen		
<b>D</b> 1 ( )	First Name Middle N	lame Last Name	_
Debtor 2 (Spouse if, filing	Shawn Richard Quillen First Name Middle N	lame Last Name	-
United State	es Bankruptcy Court for the: DISTRICT	OF MARYLAND	_
Case numb	er	_	☐ Check if this is an amended filing
Official	Form 106H		
	ule H: Your Codebtors		12/15
people are f fill it out, an	filing together, both are equally responsi	for any debts you may have. Be as complete and a ble for supplying correct information. If more space left. Attach the Additional Page to this page. On the question.	e is needed, copy the Additional Page,
1. Do y	ou have any codebtors? (If you are filing a	a joint case, do not list either spouse as a codebtor.	
■ No □ Yes			
Arizona  No.		mmunity property state or territory? (Community provided Mexico, Puerto Rico, Texas, Washington, and Wiscon quivalent live with you at the time?	
in line Form 1 out Co	2 again as a codebtor only if that person	nclude your spouse as a codebtor if your spouse is is a guarantor or cosigner. Make sure you have list, or Schedule G (Official Form 106G). Use Schedu	ted the creditor on Schedule D (Official
	ame, Number, Street, City, State and ZIP Code		nedules that apply:
3.1	lame	□ Schedule □ Schedule □ Schedule	E/F, line
	lumber Street State	ZIP Code	
3.2	lame	☐ Schedule☐ Schedule☐ Schedule☐ Schedule	E/F, line
	lumber Street Sity State	ZIP Code	
	,	5500	

	in this information to identify your obtor 1 Shamika T.								
	btor 2 Shawn Rich								
1	buse, if filing)	aru wamen			_				
Un	ited States Bankruptcy Court for the	E DISTRICT OF MARY	LAND						
	se number		_			Check if this is			
(11 K	nown					☐ An amend	U	wing postpetition	chanter
								e following date:	
<u>O</u>	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inc	ome							12/15
atta Pa	use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment								
1.	Fill in your employment information.		Debtor 1			Debtor	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed	☐ Employed			■ Employed		
	information about additional employers.		■ Not employed			□ Not e	☐ Not employed		
	, ,	Occupation	Shamika T. Quillen			Shawr	Shawn R. Quillen		
	Include part-time, seasonal, or self-employed work.	Employer's name				Sr. Me	rchant		
	Occupation may include student or homemaker, if it applies.	Employer's address						ale Club , MD 21117	
		How long employed t	here?				9 years	3	
Pa	rt 2: Give Details About Mo	nthly Income							
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, write \$0 in the	e space.	Include your nor	n-filing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the information	on for all e	empl	oyers for that pers	on on th	e lines below. If	you need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	4,750.00	
3.	Estimate and list monthly over	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	4,750.00	

Official Form 106I Schedule I: Your Income page 1

Shamika T. Quillen

Debtor 1

**Shawn Richard Quillen** Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here 4.750.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 0.00 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e. Insurance 5e. \$ 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. 0.00 0.00 Other deductions. Specify: Net 5h. 5h.+ 0.00 1,482.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 1,482.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 7 0.00 3,268.00 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ \$ 8h. 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 0.00 \$ 3,268.00 \$ 3,268.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,268.00 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain: 

Official Form 106I Schedule I: Your Income page 2

Debtor 1 Shamika T. Quillen  Check if this is: An amended filing  Debtor 2 Shawn Richard Quillen  (Spouse, if filing)  United States Bankruptcy Court for the: DISTRICT OF MARYLAND  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  I. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household?  No Do not list Debtor 1 and Yes. Fill out this information for each dependent	
Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: DISTRICT OF MARYLAND  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  Do you have dependents?  No  Do not list Debtor 1 and Debtor 1 and Debtor 2.  Poes dependent	
(Spouse, if filing)  United States Bankruptcy Court for the: DISTRICT OF MARYLAND  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  Does dependent Debtor 1 and Debtor 2.  Page of the following date:  MM//DD/YYYY	
Case number (If known)  Comparison of the fill out this information for each dependent's relationship to Debtor 2.  Case number (If known)  Official Form 106J  Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the fill of the filling together, both are equally responsible for supplying corresponding to the fill of the fill of the filling together, both are equally responsible for supplying corresponding to the fill of the fill of the filling together, both are equally responsible for supplying corresponding to the fill of the fill of the fill of the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for supplying corresponding to the filling together, both are equally responsible for suppl	apter
Official Form 106J Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No Do not list Debtor 1 and Pyes. Fill out this information for each dependent	
Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  No  Do not list Debtor 1 and Debtor 2.  Dependent's relationship to Dependent's age Does dependent live with you?	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correinformation. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cas number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No  Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents?  No  Do not list Debtor 1 and Debtor 2.  Pill out this information for each dependent	
information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and cash number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  No. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No  Do not list Debtor 1 and Debtor 2.  Dependent's relationship to Dependent's age Does dependent live with you?	12/1
<ol> <li>Is this a joint case?         □ No. Go to line 2.         ■ Yes. Does Debtor 2 live in a separate household?         ■ No         □ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.</li> <li>Do you have dependents? □ No         □ No Do not list Debtor 1 and Debtor 2.     </li> <li>Fill out this information for each dependent</li></ol>	ct se
Yes. Does Debtor 2 live in a separate household?  No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent's relationship to Debtor 2 age Does dependent live with you?	
No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? ☐ No ☐ Do not list Debtor 1 and Debtor 2. ☐ Yes. Fill out this information for each dependent	
Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.  2. Do you have dependents? No  Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent	
Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent	
Debtor 2. Debtor 1 or Debtor 2 age live with you?	
□ No.	t
Do not state the	•
dependents names.  Varus Quillen  2  Yes	
Carter Quillen 6 No   Yes	
□ No Brandton Quillen 8 ■ Yes	
No	
3. Do your expenses include expenses of people other than yourself and your dependents?	
Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to re expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill applicable date.	
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)  Your expenses	
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.  4. \$ 1,800.00	
If not included in line 4:	
4a. Real estate taxes 4a. \$ 0.00	
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00	
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$  0.00	

0.00

5. Additional mortgage payments for your residence, such as home equity loans

	tor 1 Shamika T. Quillen tor 2 Shawn Richard Quillen	Case number (if known)	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a. \$	350.00
	6b. Water, sewer, garbage collection	6b. \$	130.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	80.00
	6d. Other. Specify: phone, internet and cable	6d. \$	170.00
7.	Food and housekeeping supplies	7. \$	600.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	300.00
10.	Personal care products and services	10. \$	0.00
11.	Medical and dental expenses	11. \$	275.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	40 ft	325.00
40	Do not include car payments.	12. \$	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	298.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
	Specify:	16. \$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a. \$	360.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c Other Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18	Your payments of alimony, maintenance, and support that you did not report as		0.00
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
21.	Other: Specify: Miscellaneous	21. +\$	100.00
	Haircuts	+\$	20.00
	Diapers	+\$	40.00
22	Calculate your monthly expenses		
22.	22a. Add lines 4 through 21.	\$	E 048 00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <del></del>	5,048.00
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,048.00
23.	Calculate your monthly net income.		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,268.00
	23b. Copy your monthly expenses from line 22c above.	23b\$	5,048.00
	23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c. \$	-1,780.00
24.	Do you expect an increase or decrease in your expenses within the year after y For example, do you expect to finish paying for your car loan within the year or do you expect you modification to the terms of your mortgage?  No.  Yes.  Explain here:		se or decrease because of a
	Yes. Explain here:		

Fill in this infor	mation to identify your	case:		
Debtor 1	Shamika T. Quille	'n		
	First Name	Middle Name	Last Name	
Debtor 2	Shawn Richard Q	uillen		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106Dec			
Declarat	tion About a	n Individual	<b>Debtor's Sched</b>	ules 12/15
If two married p	eople are filing togethe	r, both are equally respor	nsible for supplying correct info	rmation.
Vou must file th	is form whonover you fi	la hankruntav sahadulas	or amonded schedules. Making	a false statement, concealing property, or
				p to \$250,000, or imprisonment for up to 20
years, or both. 1	Í8 U.S.C. §§ 152, 1341, 1	519, and 3571.	• •	
Sig	n Below			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrupt	cy forms?
■ No				
□ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119)
Under nens	alty of perjury I declare	that I have read the sum	mary and schedules filed with th	is declaration and
•	re true and correct.	that I have read the 3am	nary and senedales med with th	is decid attorraind
	amika T. Quillen		X /s/ Shawn Richard	
	ika T. Quillen ire of Debtor 1		Shawn Richard Qu Signature of Debtor 2	
Signatu	ino or Dobtor 1		Oignature of Debtor 2	
Date	April 15, 2019		Date <b>April 15, 20</b>	19

	nation to identify you				
Debtor 1	Shamika T. Quil First Name	Middle Name	Last Name		
Debtor 2	Shawn Richard	• • •			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF MARYLANI	)		
Case number					
(if known)				_	heck if this is an
				a	mended filing
Official Fac	107				
Official Fo		Accessor Complemental	<b>-</b> ::::	) [	
		Affairs for Individ			4/19
				equally responsible for sup y additional pages, write you	
	n). Answer every que		он шолор он ш	, aaaoa. pagoo,o you	
Part 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. What is your	r current marital statu	ıe?			
i. What is you	ourrent martar state				
Married					
☐ Not mar	ried				
2. During the la	ast 3 years, have you	lived anywhere other than w	here you live now?		
□ No					
Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	t include where you live nov	٧.	
Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
31983 Aml	her Dr	lived there From-To:	_		lived there
Millsboro,		November 201 March 2017	6 - Same as Debtor	1	Same as Debtor 1 From-To:
				nity property state or territory ico, Texas, Washington and W	
■ No					
_	ake sure you fill out Sci	nedule H: Your Codebtors (Off	icial Form 106H).		
Part 2 Explai	n the Sources of You	r Income			
Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and al have income that you receive	l businesses, including part		ıdar years?
□ No					
	in the details.				
_ 100.1	in the dotaile.				
		Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$9,500.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affa	irs for Individuals Filing for B	ankruptcy	page 1

page 1

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		namika i. nawn Rich	ard Quillen			Cas	e number (if known)		
				Deliterat			Dalitano		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December	31, 2018 )	■ Wages, commissio bonuses, tips	ns,	\$10,000.00	■ Wages, combonuses, tips	imissions,	\$57,000.00
				☐ Operating a busine	ss		☐ Operating a	business	
		dar year be December		■ Wages, commissio bonuses, tips	ns,	\$15,000.00	■ Wages, combonuses, tips	ımissions,	\$54,000.00
				☐ Operating a busine	ss		☐ Operating a	business	
	List each		the gross inco	e and you have income me from each source se	-	-	-		
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each (befo	ss income from source ore deductions and usions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Ра 6.		r Debtor 1's Neither D	s or Debtor 2 ebtor 1 nor D	Made Before You Filed s debts primarily cons ebtor 2 has primarily o	umer debts consumer de	? ebts. Consumer debi	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the No.	90 days befo Go to line 7 List below e paid that cro not include	personal, family, or houre you filed for bankrupt.  each creditor to whom your bankrupt payments to an attorney on 4/01/22 and every 3	cy, did you pou paid a totallyments for d	ay any creditor a total of \$6,825* or more omestic support obliques to the contract of the con	in one or more pay gations, such as ch	rments and the	nd alimony. Also, do
	■ Yes.			r both have primarily or re you filed for bankrupt			al of \$600 or more?	•	
		■ No.	Go to line 7						
		□ Yes	include pay	ach creditor to whom yoments for domestic supportion this bankruptcy case.	•				
	Creditor	's Name an	d Address	Dates of p	ayment	Total amount paid	Amount you still owe	Was this p	payment for

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Debtor 1 Debtor 2			Cas	se number (if known)		
<i>Insi</i> o of w a bu	nin 1 year before you filed for bankrupto ders include your relatives; any general pa hich you are an officer, director, person in issiness you operate as a sole proprietor. 1 ony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
■□	No Yes. List all payments to an insider.					
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
insi	nin 1 year before you filed for bankrupto der? ude payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
■□	No Yes. List all payments to an insider					
Ins	ider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Part 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
List	nin 1 year before you filed for bankrupto all such matters, including personal injury lifications, and contract disputes.					
Cas	Yes. Fill in the details.	Nature of the case			Status of the case	
Cas	se number		0 /		_	
	nticoke Memorial Hospital vs awn R. Quillen	Civil Collection			☐ Pending ☐ On appe ☐ Conclude	
					Judgment garnishme	
Na	nticoke Memorial Hospital				☐ Pending ☐ On appe ☐ Conclud  Judgment garnishme	ed with
	nin 1 year before you filed for bankrupto ck all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	shed, attached	I, seized, or levied?
<b>■</b>	No. Go to line 11. Yes. Fill in the information below.					
Cre	editor Name and Address	Describe the Property		Date		Value of the property
	nin 90 days before you filed for bankrup ounts or refuse to make a payment beca No			nancial institution	n, set off any a	mounts from your
	Yes. Fill in the details.					
Cre	editor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount

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_	otor 1 otor 2	Shawn Richard Quillen		_	Case number (	if known)	
12.	court	in 1 year before you filed for bankru t-appointed receiver, a custodian, o No			possession of an a	ssignee for the ben	efit of creditors, a
		Yes					
Pai	t 5:	List Certain Gifts and Contribution	ns				
13.		in <b>2 years before you filed for bankr</b> No Yes. Fill in the details for each gift.	ruptcy,	did you give any gifts with a tot	al value of more th	nan \$600 per person	?
	Gifts	s with a total value of more than \$60 person	00	Describe the gifts		Dates you gave the gifts	Value
		son to Whom You Gave the Gift and ress:	ł				
14.		in <b>2 years before you filed for bankr</b> No Yes. Fill in the details for each gift or c		, , , , ,	outions with a tota	I value of more than	\$600 to any charity?
	more	s or contributions to charities that the than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod		Describe what you contribute	ed	Dates you contributed	Value
		_	10)				
Pal	t 6:	List Certain Losses					
15.	or ga	in 1 year before you filed for bankru imbling?	uptcy o	r since you filed for bankruptcy,	, did you lose anyt	hing because of the	ft, fire, other disaster,
	_	No Yes. Fill in the details.					
		cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for e the amount that insurance has p nce claims on line 33 of Schedule	paid. List pending	Date of your loss	Value of property lost
		Liter Contain Bounce of the Town		inde diamina off line do di concaute	770B. Troporty.		
		List Certain Payments or Transfer					
16.	cons	in 1 year before you filed for bankru ulted about seeking bankruptcy or de any attorneys, bankruptcy petition p	prepari	ing a bankruptcy petition?			erty to anyone you
	_	No Yes. Fill in the details.					
	Add Ema	son Who Was Paid ress iil or website address son Who Made the Payment, if Not \	You	Description and value of any transferred	property	Date payment or transfer was made	Amount of payment
	30 C	nes D. Green Greenway, NW Suite 3 n Burnie, MD 21061		\$900.00 - attorney fees \$335.00 - filing fee		03/2019	\$1,235.00
17.	prom	in 1 year before you filed for bankru hised to help you deal with your cre ot include any payment or transfer tha	ditors	or to make payments to your cre		r transfer any prope	erty to anyone who
	_	No Yes. Fill in the details.					
	Pers	son Who Was Paid ress		Description and value of any transferred	property	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Shamika T. Quillen Debtor 1 Debtor 2 Shawn Richard Quillen Case number (if known) transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was property transferred payments received or debts **Address** made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) Nο П Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was account number closed, sold, before closing or Address (Number, Street, City, State and ZIP instrument Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Where is the property? (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Shamika T. Quillen Debtor 1 Debtor 2 **Shawn Richard Quillen** 

Case number (if known)

	regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
		<i>ardous material</i> means anything an env ardous material, pollutant, contaminant,			s was	ste, hazardous substance, toxic s	ubstance,	
Rep	ort a	II notices, releases, and proceedings the	at yo	u know about, regardless of wher	n the	y occurred.		
24.	Has	any governmental unit notified you that	t you	may be liable or potentially liable	und	er or in violation of an environme	ental law?	
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
25. Have you notified any governmental unit of any release of hazardous material?								
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or adn	ninis	trative proceeding under any envi	ironn	nental law? Include settlements a	and orders.	
		No						
	_	Yes. Fill in the details.						
	Cas	se Title		Court or agency	Nat	ure of the case	Status of the	
	Cas	se Number		Name Address (Number, Street, City, State and ZIP Code)			case	
Pai	t 11:	Give Details About Your Business or	Conr	nections to Any Business				
27.	With	nin 4 years before you filed for bankrupt	cy, d	id you own a business or have an	ny of	the following connections to any	business?	
		☐ A sole proprietor or self-employed in	n a tı	ade, profession, or other activity,	eith	er full-time or part-time		
		☐ A member of a limited liability comp	any	(LLC) or limited liability partnersh	ip (L	LP)		
		☐ A partner in a partnership						
		☐ An officer, director, or managing ex	ecuti	ve of a corporation				
		☐ An owner of at least 5% of the voting	g or	equity securities of a corporation				
		No. None of the above applies. Go to F	Part 1	2.				
		Yes. Check all that apply above and fill	in th	e details below for each business	s.			
	Bu	siness Name		scribe the nature of the business		Employer Identification number	•	
		dress mber, Street, City, State and ZIP Code)	Nar	ne of accountant or bookkeeper		Do not include Social Security	number or ITIN.	
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, d	id you give a financial statement (	to an	yone about your business? Inclu	ide all financial	
		No						
		Yes. Fill in the details below.						
		me dress nber, Street, City, State and ZIP Code)	Dat	e Issued				
Par		Sign Below						

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

page 6

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Deptor 1	Shamika I. Quillen	
Debtor 2	Shawn Richard Quillen	Case number (if known)
with a bar	nkruptcy case can result in fines up to	\$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C.	§§ 152, 1341, 1519, and 3571.	
/s/ Sham	nika T. Quillen	/s/ Shawn Richard Quillen
Shamika	a T. Quillen	Shawn Richard Quillen
Signature	e of Debtor 1	Signature of Debtor 2
Date A	pril 15, 2019	Date April 15, 2019
Did you at	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pa	ay or agree to pay someone who is no	ot an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes. Na	ame of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# **United States Bankruptcy Court District of Maryland**

In re	Shamika T. Quillen Shawn Richard Quillen		Case No.	
	Ondwir Mondra Quinch	Debtor(s)	Chapter	7
	VERIF	ICATION OF CREDITOR	MATRIX	
The abo	ove-named Debtors hereby verify that	the attached list of creditors is true and	correct to the best	of their knowledge.
Date:	April 15, 2019	/s/ Shamika T. Quillen		
Date.	7,5 10, 2010	Shamika T. Quillen		
		Signature of Debtor		
Date:	April 15, 2019	/s/ Shawn Richard Quillen		
		Shawn Richard Quillen		

Signature of Debtor

21st Mortgage Corporation 620 Market St. Knoxville, TN 37902

AD Astra Recovery Services 7330 W. 33rd St., N., Ste 118 Wichita, KS 67205

AR Resources, Inc. 1777 Sentry Pkwy. W., Blue Bell, PA 19422

Bank of Missouri 5109 S. Broadband Lane Sioux Falls, SD 57109

Bay Area Receivables, Inc. 714 Eastern Shore Drive Salisbury, MD 21804

Credit Acceptance Corporation PO Box 5070 Southfield, MI 48086

Credit Protection Association 13355 Noel Road, Suite 2100 Dallas, TX 75240

Delmarva Collection PO Box 37 Salisbury, MD 21803-0037

Depart of Ed/Nelnet 3015 Parker Rd., Ste 400 Aurora, CO 80014 First Advantage/NCAC 12770 Coit Rd., Ste 1000 Dallas, TX 75251

First Collect Inc. PO Box 102 Lewes, DE 19958

First Collect Inc. PO Box 102 Lewes 19958

Jefferson Capital System 16 Mcleland Rd. Saint Cloud, MN 56303

L.J. Ross Associates 4 Universal Way Jackson, MI 49202

Midland Funding, LLC 2365 Northside Dr., Ste 300 San Diego, CA 92108

National Credit Audit Corporation 12770 Coit Rd., Ste 1000 Dallas, TX 75251-1336

Nationwide Credit Corporation 5503 Cherokee Ave. Alexandria, VA 22312-2307

NC Financial 175 W. Jackson Blvd., Ste 1000 Chicago, IL 60604 Net Credit 200 W. Jackson Blvd., Ste 2400 Chicago, IL 60606

Phoenix Financial Services, LLC. PO Box 361450 Indianapolis, IN 46236-1450

Rent-A-Center 5652 Baltimore National Pkwy Catonsville, MD 21228

Southwest Credit Systems 4120 International Pkwy Carrollton, TX 75007

State Collection Svc. PO Box 6250 Madison, WI 53701

SW Credit Systems, L.P 4120 International Pkwy, Ste 1100 Carrollton, TX 75007

Syncb/Paypalsmartconn PO Box 965005 Orlando, FL 32896-5005

The Crossings at Oak Orchard 27825 Sandy Dr. Millsboro, DE 19966

Transworld Sys Inc/51 PO Box 15273 Wilmington, DE 19850

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